Acct #	
Meter#	
Meter Reading	

TOWN OF CARTHAGE 615.735.1881 ext. 202

deputyclerk@townofcarthagetn.gov APPLICATION FOR SERVICE

RCPT#

NAME:SOCIAL SECURITY #:	-			
EMAIL: EMPLOYER: DATE SERVICE REQUESTED: ADDRESS FOR SERVICE:	_ EMPLOYER PHONE #:			
MAILING ADDRESS: (if different from above)				
RENTER: COPY OF LEASE	OWNER: COPY OF	DEED		
DEPOSIT: \$	DOES PROPERTY HAVE 1	DOES PROPERTY HAVE TRASH CAN		
METER FEE: \$	BANK DRAFT	YES	NO	
TAP FEE: \$	PREVIOUS SERVICE	YES	NO	
OTHER: \$	LEAK PROTECTION	YES	NO	
TOTAL DUE: \$	LINE PROTECTION	YES	NO	
I HEREBY AGREE TO THE ABOVE FEES FOR NEW SERVICE AT THE ADDRESS LISTED. I ALSO AGREE THE INFORMATION I HAVE PROVIDED IS ACCURATE. UPON SIGNING THIS APPLICATION, I (WE) AGREE TO ABIDE THE TOWN OF CARTHAGE WATER DEPARTMENTS POLICIES, RULES AND REGULATIONS AND TO PAY ALL MONIES OWED TO THE DEPARTMENT FOR THIS ACCOUNT. I CERTIFY THAT I HAVE RECEIVED A COPY OF THIS DOCUMENT. APPLICANT:				
TOWN REP:		DATE:		

BILLS ARE DUE AND PAYABLE AT CITY HALL BY THE 15TH OF EACH MONTH WITHOUT PENALTY. PENALTY WILL ASSESS ON THE 16TH OF THE MONTH. SERVICE MAY BE DISCONNECTED FOR NON-PAYMEMNT AFTER THE 20TH OF THE MONTH IN WHICH YOUR BILL IS DUE. A \$50.00 RECONNECTION FEE WILL APPLY. AN AFTER-HOURS NIGHT DROP IS AVIAILABLE, 24/7. PLEASE PRESENT ENITRE BILL WITH PAYMENT. FAILURE TO RECEIVE A BILL DOES NOT RELIEVE CONSUMER OF PAYMENT. THERE WILL BE A \$1.00 DUPLICATE BILL SERVICE CHARGE TO ANY CUSTOMER WHO PRESENTS THEMSELVES TO CITY HALL WITHOUT THEIR ORIGINAL BILL. THERE IS A \$3.50 CONVENIENCE FEE FOR DEBIT/CREDIT CARD PAYMENTS. DELINQUENT NOTICES WILL NOT BE SENT OUT. UTILITY SERVICE WILL ONLY BE CONNECTED OR DISCONNECTED BETWEEN THE HOURS OF 9:00 A.M. AND 2:00 P.M. MONDAY THRU FRIDAY. REQUESTS FOR SERVICE AFTER 2:00 P.M. WILL BE IMPLEMENTED THE FOLLOWING WORKDAY. CLEAR WATER ACT PROHIBITS DISCRIMINATION ON THE BASIS OF RACE, COLOR, NATIONAL ORGIN, GENDER, RELIGION, AGE, DISIBILITY, POLITICAL BELIEFS, SEXUAL ORIENTATION & MARITIAL OR FAMILY STATUS.